

Summons and Complaint Return of Service

Case No. 5:14-cv-10719-JCO-MKM
Hon. John Corbett O'Meara

A copy of the Summons and Complaint has been served in the manner indicated below:

Name of Defendant Served: State Farm Mutual Automobile Insurance Company

Date of Service:

may 19, 2014

Method of Service

____ Personally served at this address:

____ Left copies at defendant's usual place of abode with (name of person):

☒ Other (specify):

certified mail, return receipt requested

____ Returned unexecuted (reason):

Service Fees: Travel \$ _____ Service \$ 11.49 Total \$ _____

Declaration of Server

I declare under the penalty of perjury that the information contained in this Return of Service is true and correct.

Name of Server:

Tina Tropper

Signature of Server:

Tina Tropper

Date:

May 21, 2014

Server's Address:

28470 W. 13 Mile Rd., Ste. 300
Farmington Hills, MI 48334

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

State Farm Mutual Automobile Ins. Co.
c/o Resident Agent-Milt Bossch
5528 Portage Rd.
Portage, MI 49002-1720

A. Signature



- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Wayne Robinson

C. Date of Delivery

5/9/14

- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

- ☐ Yes

2. Article Number

(Transfer from ser

7013 2630 0001 4071 5941

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4® in this box•

MAY 21 2014

Miller & Tischler, P.C.

28470 W. 13 Mile Road

Suite 300

Farmington Hills, MI 48334

mmv 1282-527

